

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000013682

Entity Name: PBT INTERNATIONAL, INC.

FILED  
Aug 31, 2005  
Secretary of State

## Current Principal Place of Business:

14205 MYERLAKE CIRCLE  
CLEARWATER, FL 33760 US

## New Principal Place of Business:

6174 6TH AVE. SOUTH  
ST PETERSBURG, FL 33707 US

## Current Mailing Address:

14205 MYERLAKE CIRCLE  
CLEARWATER, FL 33760 US

## New Mailing Address:

6174 6TH AVE. SOUTH  
ST PETERSBURG, FL 33707 US

FEI Number: 59-3223676

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHUH, DAN B ESQ.  
248 MIRROR LAKE DR.  
ST. PETERSBURG, FL 33710 US

## Name and Address of New Registered Agent:

CAROL, PLISGA A MS  
6174 6TH AVE. SOUTH  
ST. PETERSBURG, FL 33707 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CAROL PLISGA

08/31/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: THOMPSON, PETER B  
Address: HAYDON, WELLS  
City-St-Zip: SOMERSET, UK BA5 3EH

Title: D (X) Delete  
Name: PERRY, MARK  
Address: HAYDON, WELLS  
City-St-Zip: SOMERSET, UK BA5-3EH

Title: D ( ) Delete  
Name: THOMPSON, EDITH  
Address: HAYDON, WELLS  
City-St-Zip: SOMERSET, UK BA5-3EH

Title: S (X) Delete  
Name: SINE, MARYANN  
Address: 14205 MYERLAKE CIR.  
City-St-Zip: CLEARWATER, FL 33760

Title: EVP (X) Delete  
Name: PLISGA, CAROL A  
Address: 14205 MYERLAKE CIRCLE  
City-St-Zip: CLEARWATER, FL 33760

Title: D (X) Delete  
Name: OMLOR, JACK  
Address: 4912 58TH AVENUE SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33715

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER THOMPSON

MR

08/31/2005

Electronic Signature of Signing Officer or Director

Date